

Behavioral Health Specialist (BHS) Job Description

Qualifications: See Billing Instructions

Job Description:

Maternity Support Services (MSS) behavioral health is focused on promoting healthy birth outcomes throughout pregnancy and the postpartum period for both mother and infant.

The Behavioral Health Specialist's role on the First Steps Team is to provide brief, culturally relevant counseling interventions, education and case management for First Steps Maternity Support Services clients based on identified needs and in keeping with the identified risk factors.

The Behavioral Health Specialist serves as a consultant to the MSS team regarding the psychosocial needs of pregnant women and their families and the provision of social services. This individual provides expertise on psychosocial issues, mental health and strategies on facilitating client change. The BHS participates in care coordination activities with other MSS team members and community providers.

Screening: A brief, in-person evaluation to detect the presence or absence of risk factors associated with high risk pregnancy. Screening should be done at intervals throughout pregnancy and in the postpartum period for both mothers and infants.

Assessment: Purpose of assessment is to determine the extent or absence of the risk and identify client needs and level of self care. Information will be used by the BHS and the MSS team to develop an individualized care plan.

The BHS provides additional assessment (a more in depth evaluation) for identified risk factors when needed in a culturally sensitive manner. The BHS assessment may include, but is not limited to:

- Current family functioning
- Individual history/background,
- Cultural and religious practices
- Legal Involvement
- Health status
- Review of support systems: formal/informal
- Basic physical needs (such as food, housing, clothing)
- Education/vocation needs
- Psychosocial stressors
- Screening for mental health concerns
- Family history as indicated
- Personal safety
- Coping Skills
- Substance abuse/dependence

Surveillance - Process of on-going assessment, monitoring and follow-up regarding a client's risk factor/s or health status with adjustment to care plan as indicated.

Interventions:

- Health Education: Educate clients toward informed choices regarding personal, child and family health/mental health treatment.
- Case Management: Provide resource and referral interventions to assist clients during the maternity cycle in accessing community resources for basic needs, health care and social services.
- Brief Counseling: Provide brief, culturally relevant counseling¹ and crisis intervention to clients on areas identified in care plan. Counseling issues may include: crisis intervention, pregnancy and birth options, family planning methods, grief issues, stress, adjustment to parenting, coping skills, problem solving, abuse/neglect, drug alcohol issues, and family violence and mood disorders.

Care Coordination:

- MSS Team Participation:
 - Provide behavioral health consultation during care plan development and service planning
 - Assist with problem solving, team communication and interdisciplinary decision-making
 - Assist in coordination of services among team providers
 - Utilize other disciplines' knowledge and expertise to assist in problem solving and developing interventions. Include client participation in care plan development whenever possible.
- Coordination with Community Providers:
 - Assist in the coordination of services among community providers serving the client including but not limited to WIC, CPS and health care provider to enhance accuracy and efficiency for all parties and improve client care.
 - Inform other participants in the client's care of MSS goals and progress toward meeting those goals.
 - Reinforce when possible the messages provided by community providers and support the comprehensive care of the client.

Documentation:

- Maintain clinical records that contain completed risk screening, behavioral health assessments/interventions, follow-up care and outcomes of interventions, case-conferencing notes and progress toward desired outcomes.

- Reporting of child abuse/neglect must be documented in the charts as well as any communication and follow up with Child Protective Services.
- Comply with First Steps MSS and ICM program documentation requirements listed in the MSS/ICM Billing Instructions.
- For additional guidelines for record keeping and retention see *[WAC 246-810- 035]*.

Knowledge, Skills and Abilities:

- Effective oral and written communication skills
- Demonstrated ability to form and sustain effective relationships with clients, team members and community providers
- Demonstrated understanding of community systems
- Demonstrates respect and appreciation for diversity (culturally relevant, anti-bias, and multicultural)
- Knowledge and the ability to apply federal, state and county regulations as they pertain to social services and specific professional licensure
- Demonstrated ability to manage time, resources and client caseload
- Knowledge of human growth and development, throughout the life span
- Knowledge of brief counseling techniques and crisis intervention
- Knowledge of behavioral change theories and practice
- Knowledge of pregnancy and post pregnancy issues
- Knowledge of mental health symptoms and ability to identify global level of functioning.
- Ability to provide effective consultation
- Strong assessment and intervention skills
- Ability to blend social work and counseling practice with the overall functioning of the MSS team
- Provide effective services within a limited time frame
- Knowledge of poverty, family disorganization and health issues
- Ability to collect and report outcome data regarding behavioral health needs of the MSS population.
- Knowledge skills and ability to recognize potentially dangerous situations to self in the clinic, office, home and community setting, and take appropriate action.
- Provide leadership in assuring that all providers work collaboratively in addressing the needs of the MSS client population.
- Demonstrate a willingness and ability to provide consultation and guidance to the MSS Community Health worker



It is the individual's responsibility to keep informed of the requirements for their counseling credential and to maintain required supervision/consultation if applicable; continuing education and other requirements as specified. Working without a current credential in good standing may result in a fine to the individual and an overpayment for services billed to Medicaid.

Resources:

National & State Association of Social Workers

National and State Association of Mental Health Counselors

National and State Association of Counselors

DOH, Health Services Quality Assurance Section

DSM IV-TR

All Behavioral Health Specialists are strongly encouraged to pursue licensure as it is anticipated licensure will be required in the future for Medicaid reimbursement.